## 2000 UNIFORM BUSINESS REPORT (UBR)

## **FILED DÖCUMENT # 811022** Jul 18, 2000 8:00 am 1. Entity Name **Secretary of State** ORLEANS CHATEAU AND VILLAS INC. 07-18-2000 90087 011 \*\*\*\*61.25 Principal Place of Business Mailing Address C O CHERYL J. LEVIN. ESQ C O CHERYL J. LEVIN. ESQ. 10226 N.W. 47 STREET 10226 N.W. 47 STREET SUNRISE FL 33351 SUNRISE FL 33351 2. Principal Place of Business Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-0790085 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) LEVIN, CHERYL J ESQ,PA COURTYARD BUSINESS CENTER 10266 N.W. 47 STREET City Zip Code SUNRISE FL 33351 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida, SIGNATURE Signature, typed or printed name of registered agent and title if applicable DATE (NOTE: Registered Agent signature required when reinstating) • 9: Election Campaign Financing FILE NOW: FEE IS \$61.25 Make Check Payable to \$5.00 May Be Trust Fund Contribution. Added to Fees **Department of State** After September 13, 2000 min. will be \$236.25 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. VD TITLE Delete TITLE Change 🔀 Addition MIMI GILLBURE SMITH, R.M. JR. NAME NAME 2000 S. OCEAN LANE 2000 S. Olean Lane STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FT. LAUDERDALE-FL Ft LAUDERDALE TITLE Ð. Delete TITLE ☐ Change ☐ Addition DEGUISE, JEAN-NAME STREET ADDRESS 2000 S. OGEAN LANE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FORT LAUDERDALE FL-33316 TITLE ☐ Detete TITLE ☐ Change Addition NAME EMMERICH, T. H NAME STREET ADDRESS 2000 S. OCEAN LANE STREET ADDRESS CITY-ST-ZIP FORT LAUDERDALE FL 33316 CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition TITLE NAME PENISTEN, GARY D NAME STREET ADDRESS STREET ADDRESS 2000 \$ OCEAN LANE CITY-ST-ZIP CITY-ST-ZIP FT. LAUDERDALE FL ☐ Change ✓ Addition Delete TITLE TITI F TODD H-WEAVER NAME PATRICIA MONTALBONO NAME STREET ADDRESS STREET ADDRESS 2000 S-OCEAN LN 2000 5. Ocean hane CITY-ST-ZIP CITY-ST-7IP FT-LAUDERDALE-FL-33316 FT LAUDERDALF, FI 33316 TITLE Delete TITLE ☐ Change Addition MONTALBAND, THOMAS NAME NAME MARION 6. Wests 2000 S. OCEAN LANE STREET ADDRESS STREET ADDRESS 2000 5. Ocea CITY-ST-ZIP CITY-ST-ZIP FORT-LAUDERDALE-FL-33316 handerdale. ગ્રી. 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information

GNATURE: WORK AND THE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DIVECTOR 7/10/00 954-524 612

changed, or on an attachment with an address, with all other like empowered

indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if

## 2000 UNIFORM BUSINESS REPORT (UBR)

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DOCUMENT # 811022						3010990				
3, -	CHATEAU AND VILLAS IN	C.								
Principal Place o	Business	Mailing Address								
C O CHERYL J. LEVIN. ESQ 10226 N.W. 47 STREET SUNRISE FL 33351		C O CHERYL J. LEVIN. ESO 10226 N.W. 47 STREET SUNRISE FL 33351-7970								
2. Principal Place of Business		3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE					
City & State		City & State		4. FEI Numb	59-0790085		Not A	ed For		
Zip	Country	Zip	Zip Country			e of Status Desired	۽ ت	8.75 Addition	nal	
	6. Name and Address of Currer	nt Registered Agent			7. Name an	d Address of New F	legistered A	gent		
				Name						
	RYL J ESQ,PA			Street Add	ress (P.O. Box Numl	per is Not Acceptable	e) 			
COURTYAR	D BUSINESS CENTER									
10266 N.W. 47 STREET				City			FL	Zip Code		
SUNRISE F	amed entity submits this statement			· · · · · · · · · · · · · · · · · · ·	onistored agent or h	ooth in the state of F				
	Signature, typed or printed name of registered ag				a (equired when religiblishing)	e lou	DATE	10, 3 a. K.V.		
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NAME	TODD H WEAVER			STREET ADDRESS	3000 5.	OCEAN "	75			
STREET ADDRESS	2000 S OCEAN LN FT LAUDERDALE FL 33316	***		CITY-ST-ZIP	FHLAUS	ERPALE	,FL	93316	<u> </u>	
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NAME	MONTALBAND, THOMAS		ŀ	NAME	MARION	G WELLS	_			
	2000 S. OCEAN LANE		1	STREET ADDRESS CITY-ST-ZIP		OCEAN B		3316		
	FORT LAUDERDALE FL 333 y certify that the information supplies	16	u for the	evernation et	ated in Section 119	07(3)(i), Florida Stati	tes. I further	certify that the	informal	
12. I hereb	y certify that the information supplie	d with this filing does not qualify	y for the lat my si	gnature shall	have the same lega	effect as if made un	der oath; tha	it I am an office ire in Block 10 :	ar or ⊡∵ਦ or Block	

I nereby certify that the information supplied with this lifting and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer of indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer of indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer of indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer of indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer of indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer of indicated on this report of indicated on the indicated on

SIGNATURE:

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ORLEANS CHATEAU AND VILLAS, INC. CORPORATION ACCOUNT		7175
2000 S. OCEAN LANE FORT LAUDERDALE, FL 33316	DATE 3-17-00	63-27/631 FL 85 805
PAY TO THE ORDER OF DEPT of State	\$	
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